

March 12, 1987

LB 298, 320, 351, 411, 469, 565, 625
630

(Re: LB 411, LB 469 and LB 565.)

Business and Labor gives notice of hearing.

Retirement reports 298 to General File with amendments. Signed, Senator Haberman. (See page 1054 of the Legislative Journal.)

Urban Affairs reports 625 to General File, 630, General File, and 351, General File. Those are signed by Senator Hartnett. (See page 1055 of the Legislative Journal.)

Mr. President, the next bill is 320, introduced by Senator Wesely. (Read title.) Introduced on January 15, referred to Health and Human Services, advanced to General File. I have no amendments to the bill, Mr. President.

SPEAKER BARRETT: Thank you. (Gavel.) Order, please. Senator Wesely.

SENATOR WESELY: Thank you, Mr. Speaker. Members, LB 320 was a bill introduced by myself and heard by the Health Committee. There aren't amendments to it. It came out of a study studying mental health issues in the state. We found the match formula problem, jailing of mental health individuals on productive custody a problem and also just generally the need for residential services. So there are three bills that were introduced as a result of that study. This one comes out as the result of a lot of counties in the rural area of the state that did not raise the money to meet the match formula for mental health services. The mental health match is at 25 percent local taxes. That is the highest of the different local service provisions in terms of match. The other areas, for instance, mental retardation, substance abuse, are lower than that and the higher match caused counties, under the tight budgets that they have, to decline additional revenues that were provided in the budget last year. And so some of the rural areas of the state did not proceed with enhancements in mental health services and that money was then taken back and cut in the special session. Again, the concern is that we ought to have a fairly level playing field, whether it's substance abuse, mental health or mental retardation services. And this area of mental health match is higher than the other ones and, as a result, has resulted in counties not having the ability or not choosing to meet the obligations of this match. And so we are trying to make it easier for the counties to co-fund the mental health